## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

10/717,297

•		:	SMALL E	NTITY		OTHER	THA	M						
(Column 1) (Column 2)								TYPE [		OR	SMALL			
TOTAL CLAIMS			lef					RATE	FEE	]	RATE	FE	Ε	
F	OR		NUMBER FILED		NUME	BER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770	.00	
Ţ	OTAL CHARGE	ABLE CLAIMS	## minus 20=		•	24		X\$ 9=		OR	X\$18≈	43	2.	
INI	DEPENDENT C	LAIMS	6 minus 3 = 1		3			X43=		OR	X86=		8	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	α <u>υ</u>	_	
* If the difference in column 1 is less than zero, enter "0" in c						xolumn 2		TOTAL	<del> </del>	OR	TOTAL	146	2	
16	CLAIMS AS AMENDED - PART II							TOTAL		JOH		<u> </u>		
10	مادها	(Column 1) (Column 2) (Column 3)							SMALL ENTITY OR SMALL ENTIT					
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADI TION FE	VAL	
	Total	. 97	Minus	U	4	= O		X\$ 9=		OR	X\$18=	1	Ì	
AME	Independent	. 0	Minus	***	0			X43=		OR	X86=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=			
							L	TOTAL			TOTAL	1	7	
		A	VDDIT. FEE			addit. Fee	,	$\dashv$						
		(Column 1) CLAIMS		(Colum	ST	(Column 3)	1 г		ADDI-	1		ADI		
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL"		RATE	TION	NAL	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		l	
ME.	Independent	*	Minus	***		=		X43=		OR	X86=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM													
								+145=		OR	+290=		ᆚ	
					•		A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE			
(Column 1) (Column 2) (Column 3)														
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADI TION FE	NAL	
	Total	• .	Minus	**		s .		X\$ 9=		OR	X\$18=			
	Independent	<b>*</b>	Minus	***		= '	╽┟	X43=	<del></del>	OR	X86=			
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									UH			一	
٠ ،	I the entry in colum	nn 1 is less than th	e entry in colu	nn 2. write '	"O" in cod	umn 3.		+145=		OR	+290=		_	
** (	f the "Highest Nur	mber Previously Pa mber Previously Pa	id For IN THIS	SPACE is	less than	20. enter "20."	A1	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE			
		ber Previously Paid					r foun	d in the app	ropriate box	in col	umn 1			